PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

ap in m

oppropriate. All further conditions and control of the control of	d below or directed oth	g the Patent, advance or erwise in Block 1, by (a	ders and notification a) specifying a new c	of mainte orrespond	enance fees wence address;	red). Bl ill be m and/or	ocks I through 5 shailed to the current (b) indicating a separation	corres rate "l	pondence address as FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
22878 7590 11/19/2009 AGILENT TECHNOLOGIES INC. INTELLECTUAL PROPERTY ADMINISTRATION, LEGAL DEPT. MS BLDG. E P.O. BOX 7599					Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
LOVELAND, CO	J 80537								(Depositor's name)	
		(Signature)								
									(Date)	
APPLICATION NO.	CATION NO. FILING DATE		FIRST NAMED INVENTOR			ATTORNEY DOCKET NO.			CONFIRMATION NO.	
10/725,769	10/725,769 12/02/2003			Stuart M. Lindsay			10060298-2 3836			
TLE OF INVENTION: APPLN. TYPE	FAST SCANNING ST. SMALL ENTITY	AGE FOR A SCANNING	F PROBE MICROSC		V. PAID ISSUE		TOTAL FEE(S) DUE		DATE DUE	
	XXX NO			OE FRE	\$0					
nonprovisional 4425				_	\$0		∌ ⊁63∌	.810 02/19/2010		
EXAMINER		ART UNIT	CLASS-SUBCLASS	5						
KO, TONY 2878			250-234000							
Change of correspondence address or indication of "Fee Address" (37 FR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.							
PLEASE NOTE: Unle	ess an assignee is identi	fied below, no assignee	data will appear on t	he patent.	If an assigne	ee is ide	ntified below, the do	ocume	nt has been filed for	
recordation as set forth (A) NAME OF ASSIG	in 37 CFR 3.11. Comp	letion of this form is NO	Γ a substitute for filin (B) RESIDENCE: (0	g an assigi	nment.					
Agilent Technologies, Inc. Santa Clara, California										
ease check the appropri	ate assignee category or	categories (will not be pr	inted on the patent):	Indi	vidual ≚ Co	rporatio	n or other private gro	oup ent	ity Government	
a. The following fee(s) a X Issue Fee X Publication Fee (No Advance Order - #	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. x The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-1078 (enclose an extra copy of this form).									
	us (from status indicated SMALL ENTITY statu									
		nired) will not be accepted tes Patent and Trademark		han the ap	plicant; a regis	stered at	torney or agent; or th	e assig	gnee or other party in	
Authorized Signature _	uthorized Signature/John L. Imperato/			I	Date	27 Jar	nuary 2010			
Typed or printed name		Registration No40,026								
his collection of informa application. Confidenti ibmitting the completed is form and/or suggestic	ation is required by 37 C lality is governed by 35 application form to the ons for reducing this burgering 22212 1450.	FR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary den, should be sent to the	on is required to obtain 1.14. This collection depending upon the e Chief Information Computer Texas	n or retain is estimate individual Officer, U.S	a benefit by the d to take 12 n case. Any cons. Patent and	ne public ninutes t mments Tradema	c which is to file (and to complete, includin on the amount of tir ark Office, U.S. Depa	l by the g gath ne you artmen	e USPTO to process) ering, preparing, and require to complete t of Commerce, P.O.	

This collection of information is rean application. Confidentiality is a submitting the completed applicate this form and/or suggestions for re Box 1450, Alexandria, Virginia 22 Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.